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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT VIA FAX: 1-703-872-9306 (1 page)	Application Number	10/782,893
	Filing Date	2/23/2004
	First Named Inventor	Michel SWIFT
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	700-B01.US

I hereby revoke all previous powers of attorney given in the above-identified application.

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☒ Practitioner(s) named below:

Name	Registration Number
Franz BONSANG	56638

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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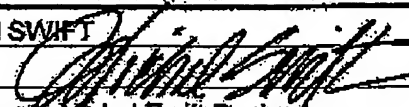
I am the:

☒ Applicant

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Michel SWIFT
Signature	
Title and Company	President, Michel Swift Design Inc.
Date	June 1, 2005

Note: Signatures of all the inventors or assignees of record of the entire interest or their representatives are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

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